IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PERMIT# 094773 PIN# 4756 24 2011 PT DATE 04/02/01

OWNER OR CONTRACTOR SPEAR CONST PHONE: Business 704-855-2300 Home

ADDRESS 450 AUCTION DR SALISBURY NC 28147

LOCATION HWY 21 N, ® ON JANE SOWERS, ® CRAWFORD, © BROOKVIEW, ON LEFT PAST CHURCH

SUBDIVISION BRANTWOOD BLOCK / SECTION LOT 2 LOT AREA 1.52 SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 825 Date 3-11-01
Pump Tank: Gallons: PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet [redacted] Linear Feet 400
No Lines 6 Trench Width 36 Max Trench Bottom Depth 36" Gravel Depth 12"

X New System ☐ Repair System Type: I (II) III IV V VI
System Description: CONV GRAV
Repair System Description: PUMP/PANEL
Maintenance Agreement Required: ☐ Yes X No

X House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other

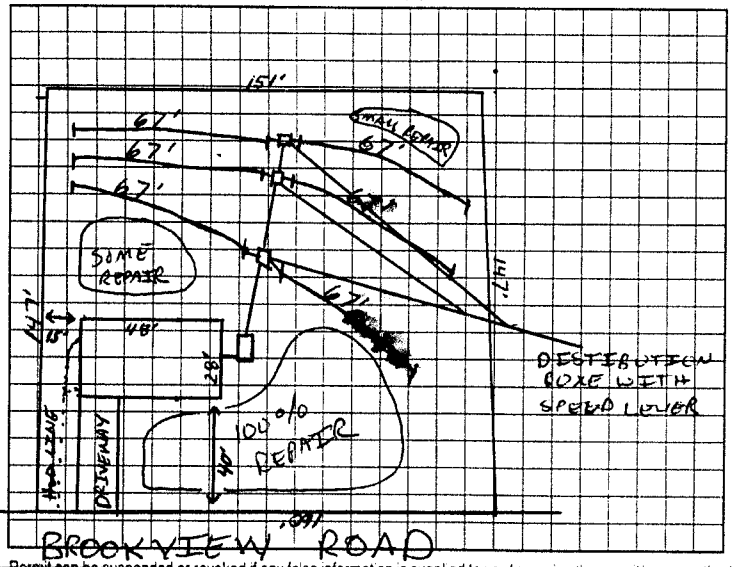
☐ Slab X Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual X Public ☐ Community

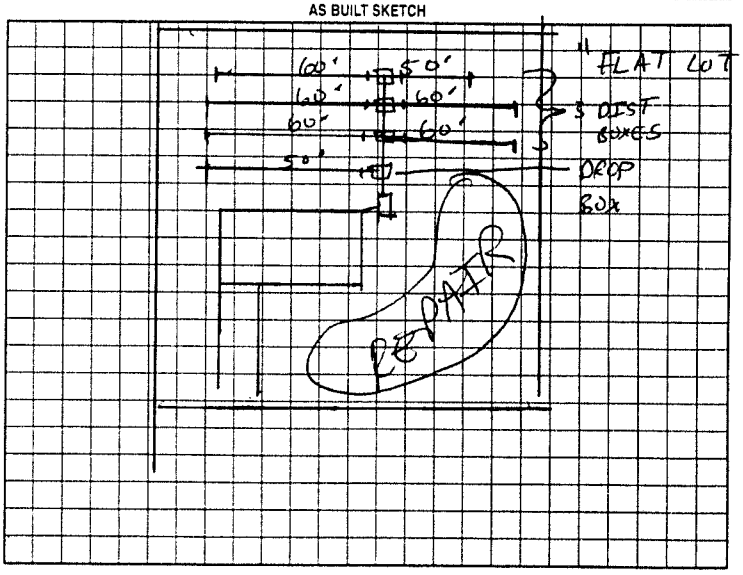
Comments/Conditions: ① Use 3 Distribution BOXES & 3 speed Levelers ② INSTALL LINES ON CONTOUR & KEEP SYSTEM 5' off house & 10' off property lines. ③ KEEP H2O Line on left side of driveway.

Comments/Conditions: 50 SYSTEM INSTALLED AS BELOW
60 60 WITH POLY LOK FITTEF & MARKER
60 60
60 50

INITIAL SITE SKETCH



AS BUILT SKETCH



~~Permit can be suspended or revoked if any false information is supplied toward securing~~ the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: date 4/2/01 Installed by: ROWAN SEPTIC

Improvement Permit by: KSI date 04-02-01 Operation Permit by: KSI date 5-9-01

Authorization to Construct by: KSI date 04-02-01 Existing System Inspection by: date

HEALTH DEPT COPY WHITE OWNER COPY (FINAL) YELLOW OWNER COPY (INITIAL) PINK